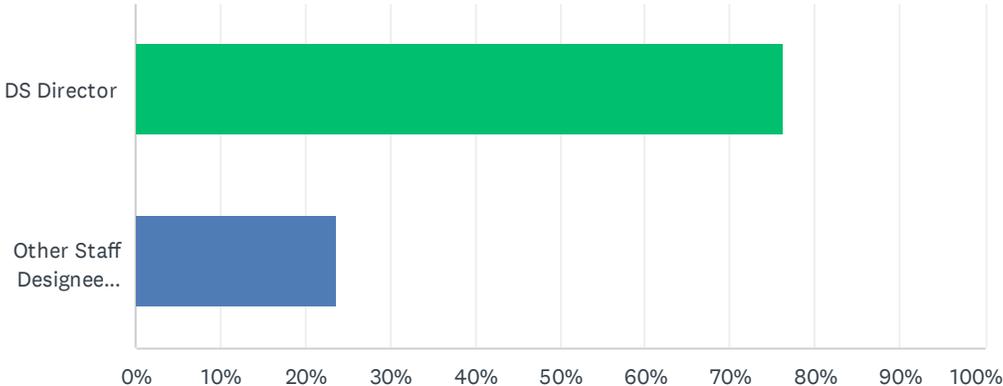


Q1 Name of the person completing questionnaire

Answered: 38 Skipped: 0

Q2 Title of the person completing this questionnaire

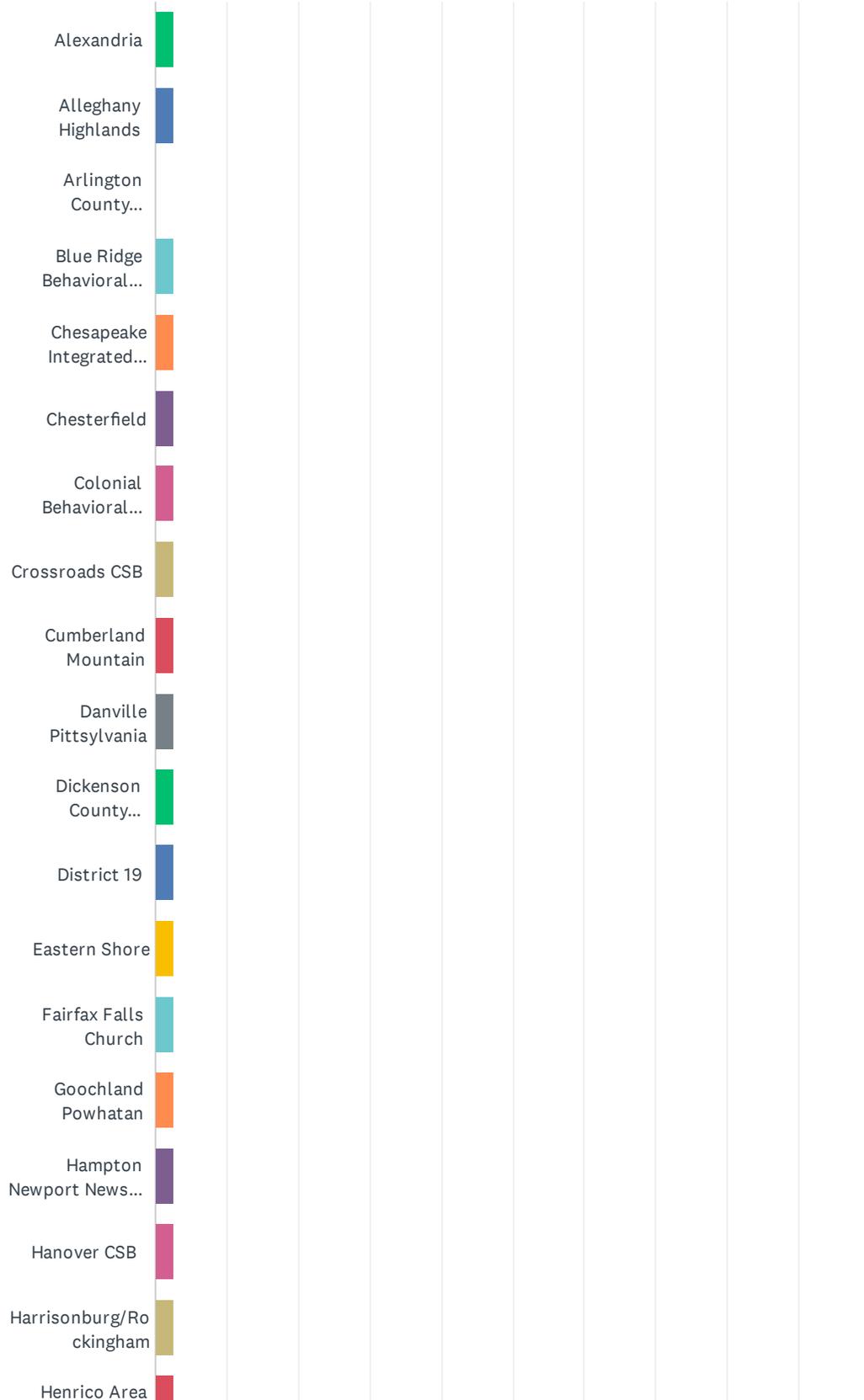
Answered: 38 Skipped: 0



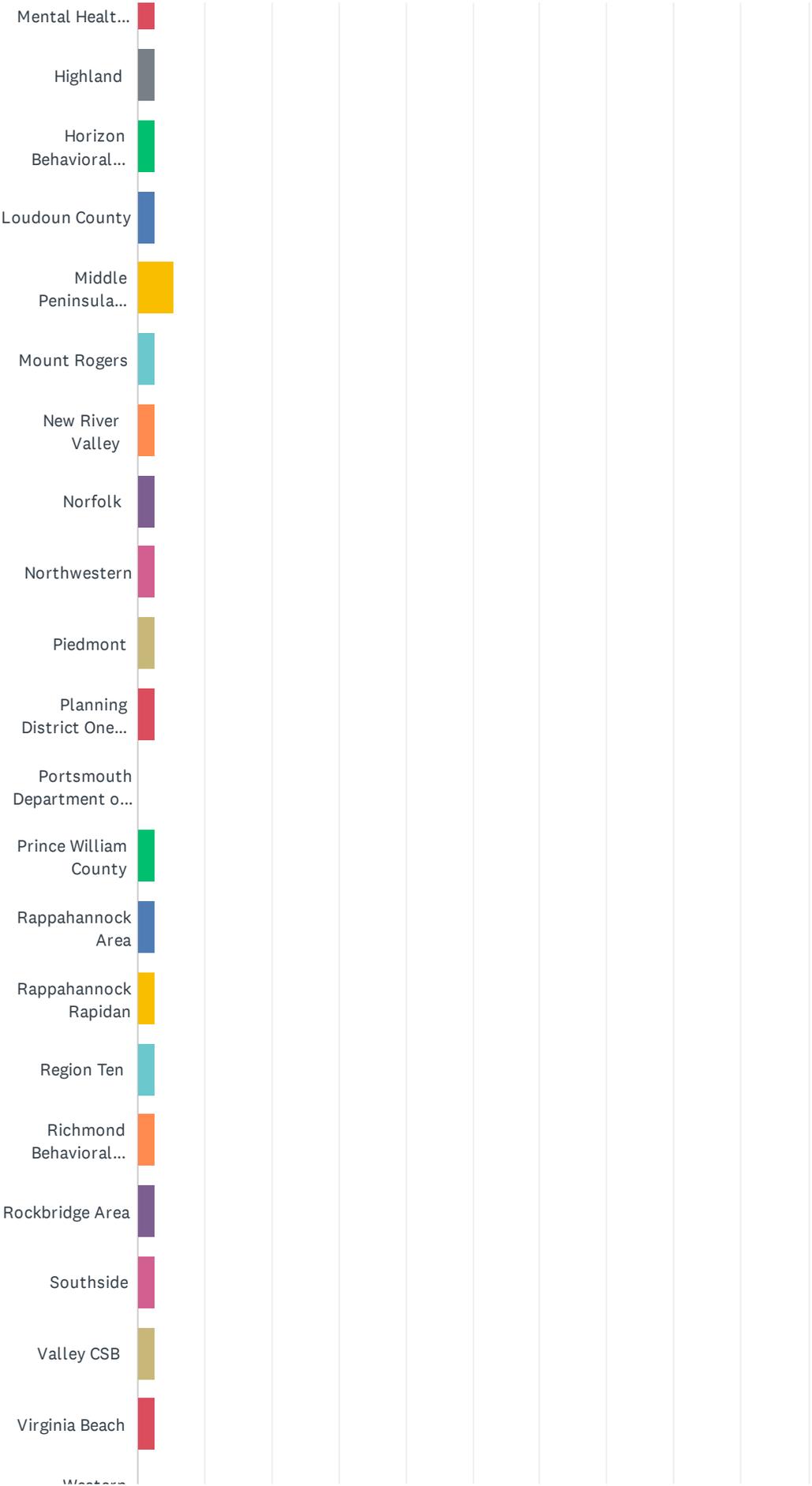
ANSWER CHOICES	RESPONSES	
DS Director	76.32%	29
Other Staff Designee (please specify title)	23.68%	9
TOTAL		38

Q3 Name of CSB/BHA

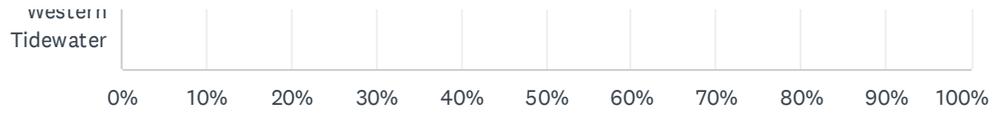
Answered: 38 Skipped: 0



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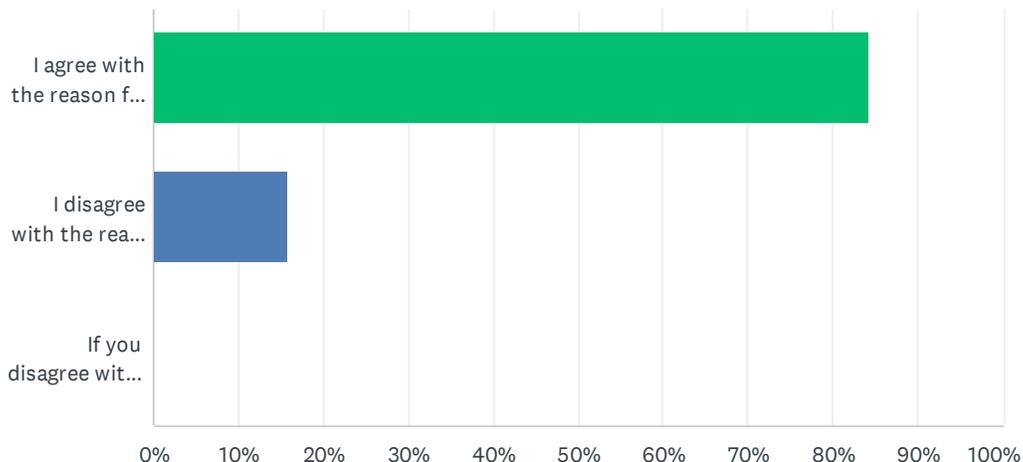
ANSWER CHOICES	RESPONSES	
Alexandria	2.63%	1
Alleghany Highlands	2.63%	1
Arlington County Developmental Disabiity Services	0.00%	0
Blue Ridge Behavioral Healthcare	2.63%	1
Chesapeake Integrated Behavioral Health	2.63%	1
Chesterfield	2.63%	1
Colonial Behavioral Health	2.63%	1
Crossroads CSB	2.63%	1
Cumberland Mountain	2.63%	1
Danville Pittsylvania	2.63%	1
Dickenson County Behavioral Health Services	2.63%	1
District 19	2.63%	1
Eastern Shore	2.63%	1
Fairfax Falls Church	2.63%	1
Goochland Powhatan	2.63%	1
Hampton Newport News CSB	2.63%	1
Hanover CSB	2.63%	1
Harrisonburg/Rockingham	2.63%	1
Henrico Area Mental Health and DS	2.63%	1
Highland	2.63%	1
Horizon Behavioral Health Central Virginia	2.63%	1
Loudoun County	2.63%	1
Middle Peninsula Northern Neck	5.26%	2
Mount Rogers	2.63%	1
New River Valley	2.63%	1
Norfolk	2.63%	1
Northwestern	2.63%	1
Piedmont	2.63%	1
Planning District One Developmental Services	2.63%	1
Portsmouth Department of Behavioral Healthcare Services	0.00%	0
Prince William County	2.63%	1
Rappahannock Area	2.63%	1

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Rappahannock Rapidan	2.63%	1
Region Ten	2.63%	1
Richmond Behavioral Health Authority	2.63%	1
Rockbridge Area	2.63%	1
Southside	2.63%	1
Valley CSB	2.63%	1
Virginia Beach	2.63%	1
Western Tidewater	0.00%	0
TOTAL		38

Q4 Performance Measure C8: Number and percent of provider agency staff meeting provider orientation training requirements (DMAS). Please indicate the following:

Answered: 38 Skipped: 0



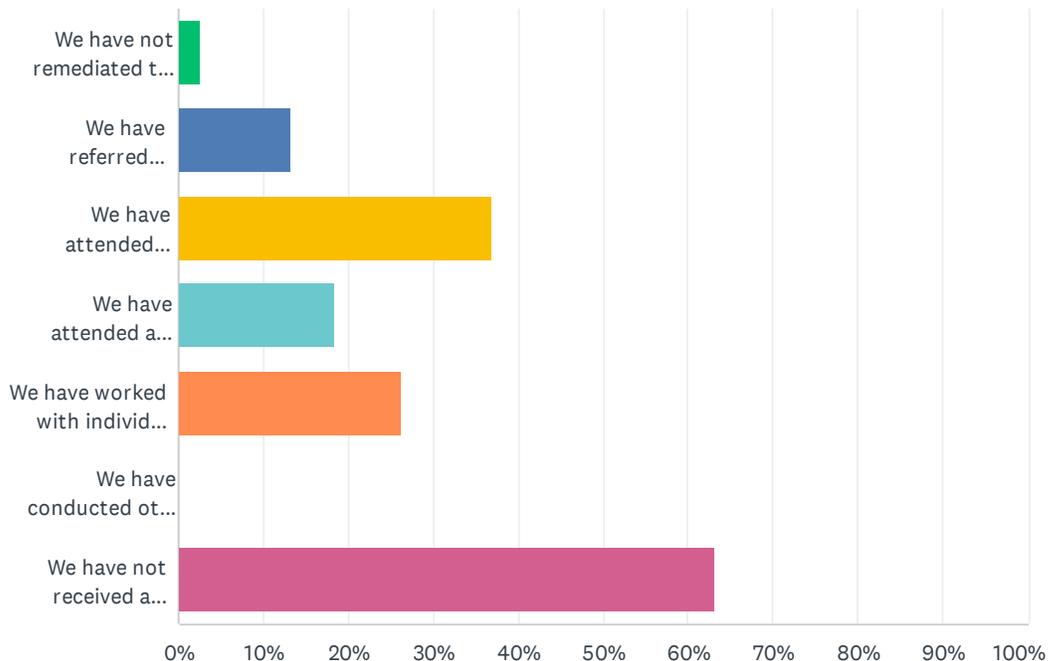
ANSWER CHOICES	RESPONSES	
I agree with the reason for noncompliance with the PM identified in the report.	84.21%	32
I disagree with the reason for noncompliance with the PM identified in the report.	15.79%	6
If you disagree with the primary reason for noncompliance with the PM identified in the report, what are other reasons for noncompliance?	0.00%	0
TOTAL		38

Q5 If you disagree with the primary reason for noncompliance, what are alternative/supplemental reasons for noncompliance?

Answered: 13 Skipped: 25

Q6 How has your CSB remediated this area of noncompliance? Please select all that apply.

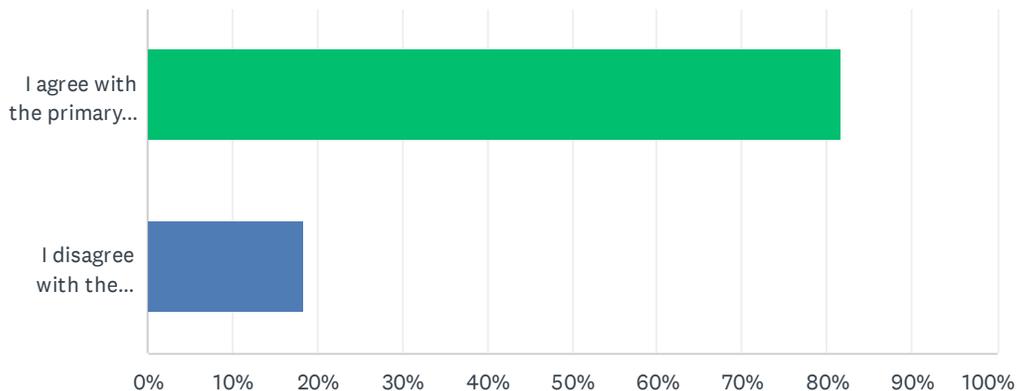
Answered: 38 Skipped: 0



ANSWER CHOICES	RESPONSES	
We have not remediated this area of noncompliance yet	2.63%	1
We have referred providers to DBHDS for training.	13.16%	5
We have attended Provider Rountable/SC meetings with discussion on the topic	36.84%	14
We have attended a DBHDS training/received technical assistance on this topic	18.42%	7
We have worked with individual providers to remediate this area of noncompliance.	26.32%	10
We have conducted other remediation.	0.00%	0
We have not received a citation in this area.	63.16%	24
Total Respondents: 38		

Q7 Performance Measure C9: Number and percent of provider agency direct support professionals (DSPs) meeting competency training requirements. Please indicate the following

Answered: 38 Skipped: 0



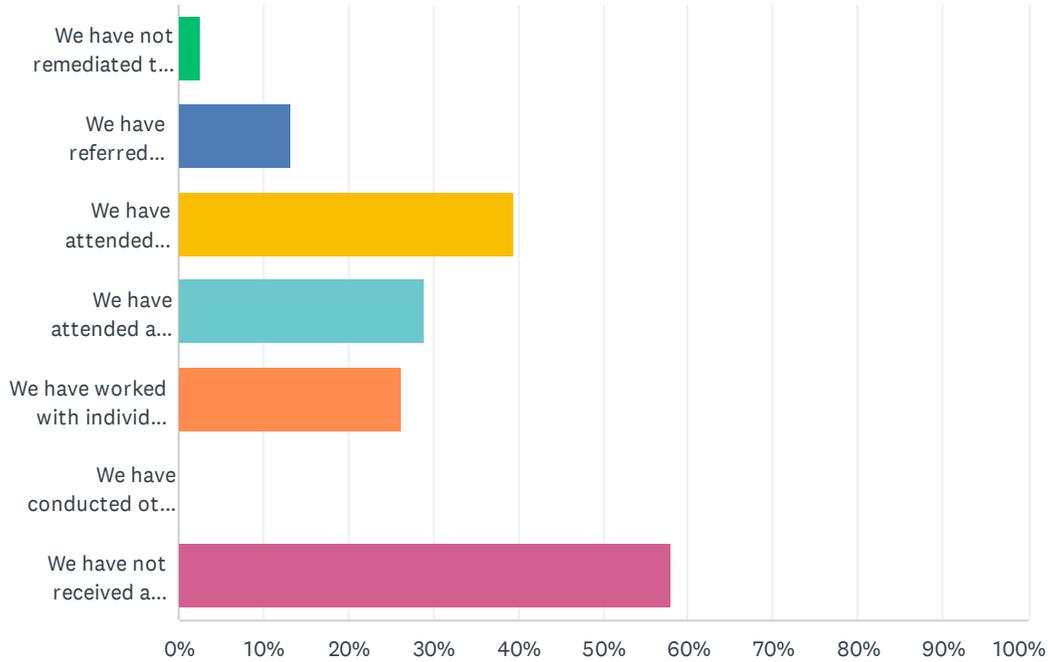
ANSWER CHOICES	RESPONSES	
I agree with the primary reason for noncompliance with the PM identified in the report	81.58%	31
I disagree with the primary reason for noncompliance with the PM identified in the report	18.42%	7
TOTAL		38

Q8 If you disagree with the primary reason for noncompliance, what are alternative/supplemental reasons for noncompliance?

Answered: 15 Skipped: 23

Q9 How has your CSB remediated this area of noncompliance? Please select all that apply.

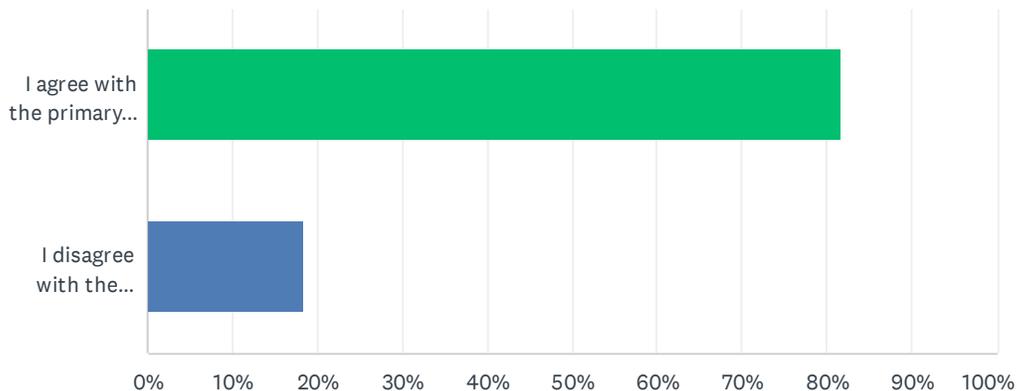
Answered: 38 Skipped: 0



ANSWER CHOICES	RESPONSES	
We have not remediated this area of noncompliance yet.	2.63%	1
We have referred providers to DBHDS for training.	13.16%	5
We have attended Provider Roundtable/SC meetings with discussion on the topic.	39.47%	15
We have attended a DBHDS training/received technical assistance on this topic.	28.95%	11
We have worked with individual providers to remediate noncompliance in this area.	26.32%	10
We have conducted other remediation.	0.00%	0
We have not received a citation in this area.	57.89%	22
Total Respondents: 38		

Q10 Performance Measure D1: Number and percent of individuals who have Plans for Support that address their assessed needs, capabilities and desired outcomes. (DMAS)

Answered: 38 Skipped: 0



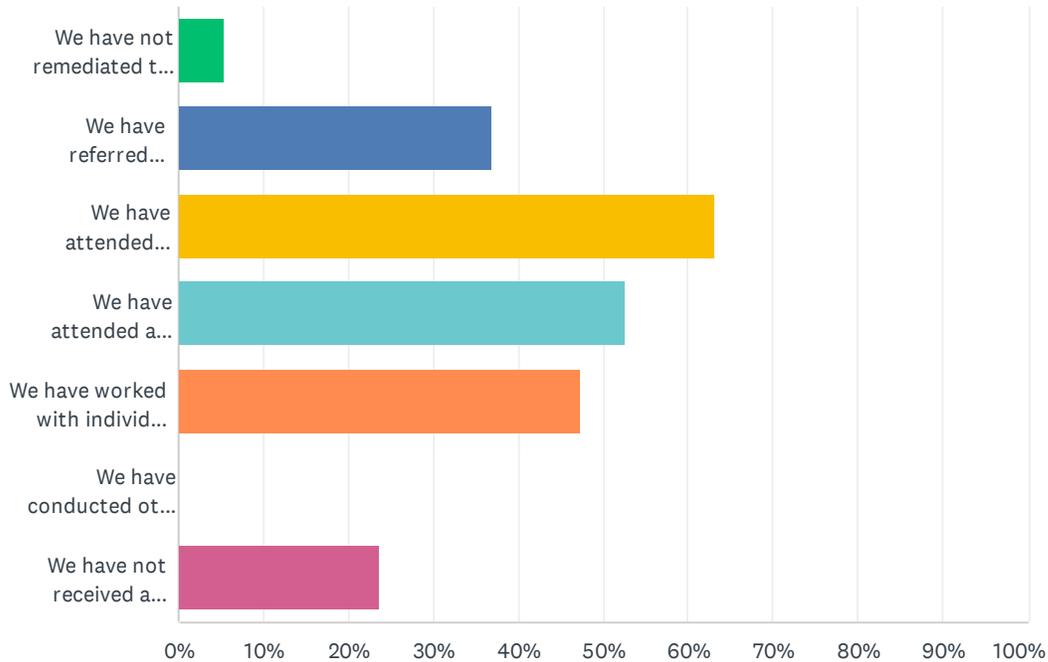
ANSWER CHOICES	RESPONSES	
I agree with the primary reason for noncompliance identified in the QRT EOY Report	81.58%	31
I disagree with the primary reason for noncompliance identified in the QRT EOY Report.	18.42%	7
TOTAL		38

Q11 If you disagree with the primary reason for noncompliance, what are alternative/supplemental reasons for noncompliance?

Answered: 15 Skipped: 23

Q12 How has your CSB remediated this area of noncompliance? Please select all that apply.

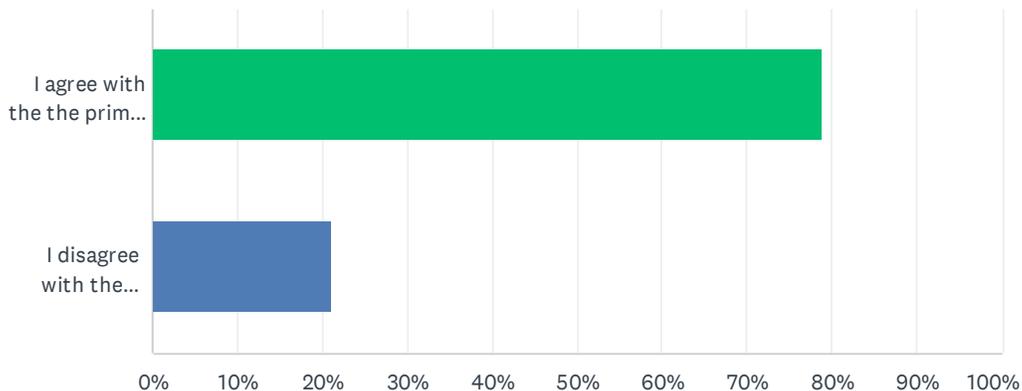
Answered: 38 Skipped: 0



ANSWER CHOICES	RESPONSES	
We have not remediated this area of noncompliance yet.	5.26%	2
We have referred providers to DBHDS for training.	36.84%	14
We have attended Provider Rountable/SC meetings with discussion on the topic.	63.16%	24
We have attended a DBHDS training/received technical assistance on this topic.	52.63%	20
We have worked with individual providers to remediate noncompliance in this area.	47.37%	18
We have conducted other remediation.	0.00%	0
We have not received a citation in this area.	23.68%	9
Total Respondents: 38		

Q13 Performance Measure D3: Number and percent of individuals who have Plans for Support that address their assessed needs, capabilities and desired outcomes. (DMAS)

Answered: 38 Skipped: 0



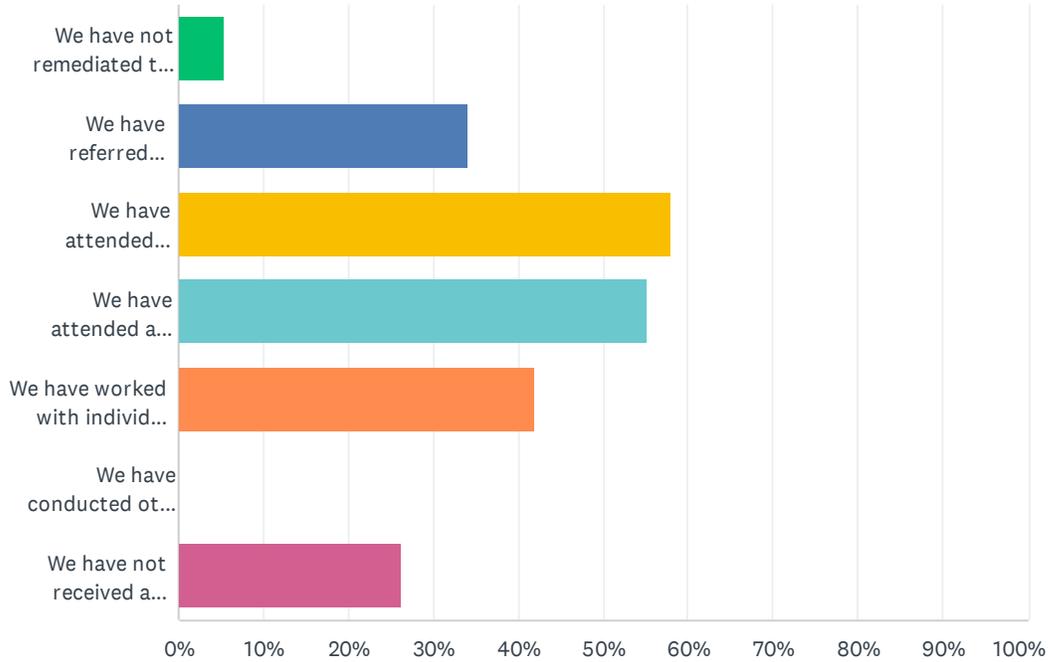
ANSWER CHOICES	RESPONSES	
I agree with the the primary reason for noncompliance identified in the QRT EOY Report.	78.95%	30
I disagree with the primary reason for noncompliance identified in the QRT EOY Report	21.05%	8
TOTAL		38

Q14 If you disagree with the primary reason for noncompliance, what are alternative/supplemental reasons for noncompliance?

Answered: 13 Skipped: 25

Q15 How has your CSB remediated this area of noncompliance? Please select all that apply.

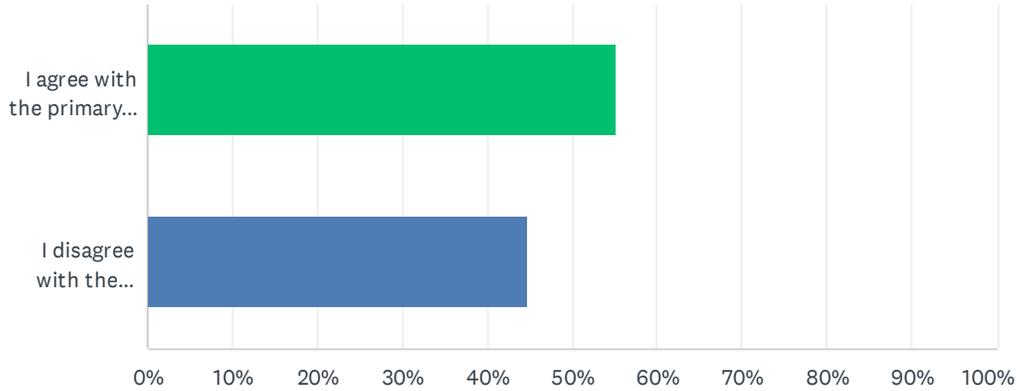
Answered: 38 Skipped: 0



ANSWER CHOICES	RESPONSES	
We have not remediated this area of noncompliance yet.	5.26%	2
We have referred providers to DBHDS for training.	34.21%	13
We have attended Provider Roundtable/SC meetings with discussion on the topic.	57.89%	22
We have attended a DBHDS training/received technical assistance on this topic.	55.26%	21
We have worked with individual providers to remediate noncompliance in this area.	42.11%	16
We have conducted other remediation.	0.00%	0
We have not received a citation in this area.	26.32%	10
Total Respondents: 38		

Q16 Performance Measure D6: Number and percent of individuals whose service plan was revised, as needed, to address changing needs.

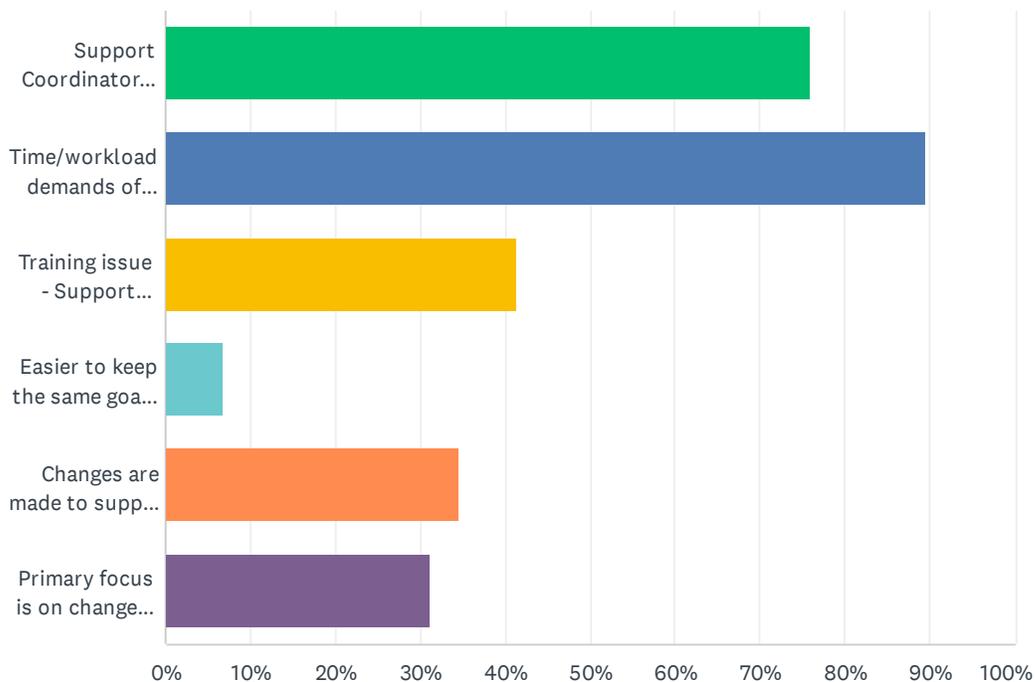
Answered: 38 Skipped: 0



ANSWER CHOICES	RESPONSES	
I agree with the primary reason for noncompliance identified in the QRT EOY Report.	55.26%	21
I disagree with the primary reason for noncompliance identified in the QRT EOY Report.	44.74%	17
TOTAL		38

Q17 If you disagree with the primary reason for noncompliance, what are alternative/supplemental reasons for noncompliance?

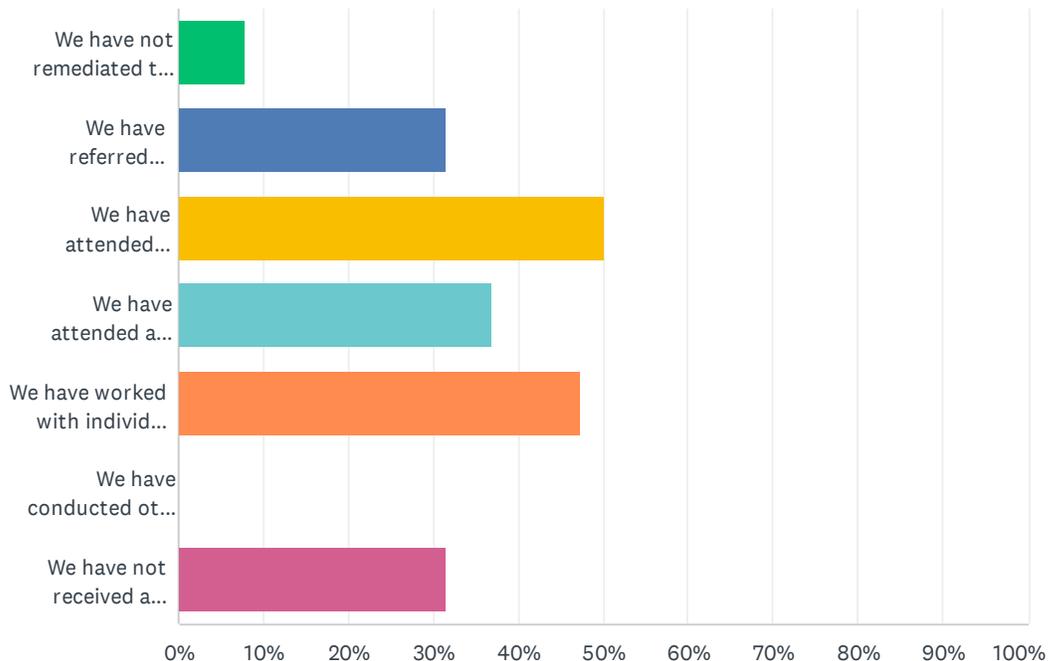
Answered: 29 Skipped: 9



ANSWER CHOICES	RESPONSES	
Support Coordinator turnover	75.86%	22
Time/workload demands of Support Coordinator/Provider	89.66%	26
Training issue - Support Coordinator/Provider may not recognize when the Plan needs to be updated	41.38%	12
Easier to keep the same goals from year to year	6.90%	2
Changes are made to support the person but not added (documented) until the Plan is due to be updated	34.48%	10
Primary focus is on changes needed to support the individual's health and safety	31.03%	9
Total Respondents: 29		

Q18 How has your CSB remediated this area of noncompliance? Please select all that apply.

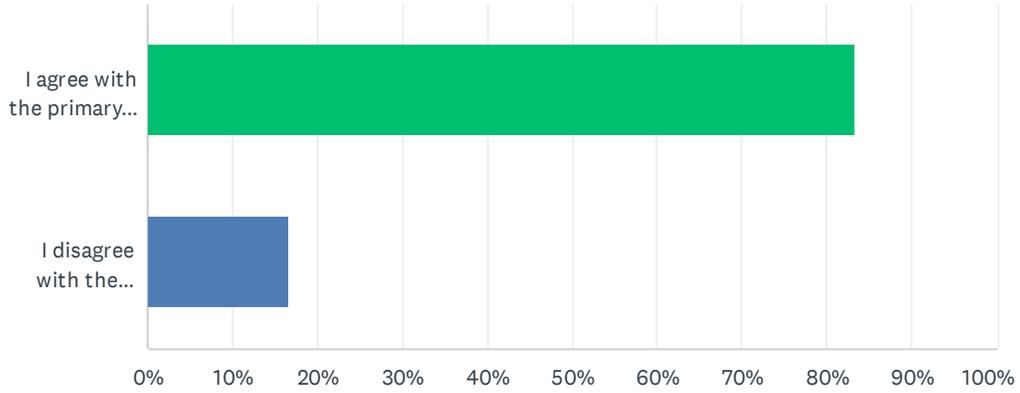
Answered: 38 Skipped: 0



ANSWER CHOICES	RESPONSES	
We have not remediated this area of noncompliance yet.	7.89%	3
We have referred providers to DBHDS for training.	31.58%	12
We have attended Provider Roundtable/SC meetings with discussion on the topic.	50.00%	19
We have attended a DBHDS training/received technical assistance on this topic.	36.84%	14
We have worked with individual providers to remediate noncompliance in this area.	47.37%	18
We have conducted other remediation.	0.00%	0
We have not received a citation in this area.	31.58%	12
Total Respondents: 38		

Q19 Performance Measure D9: Number and percent of individuals who received services in the type specified in the plan.

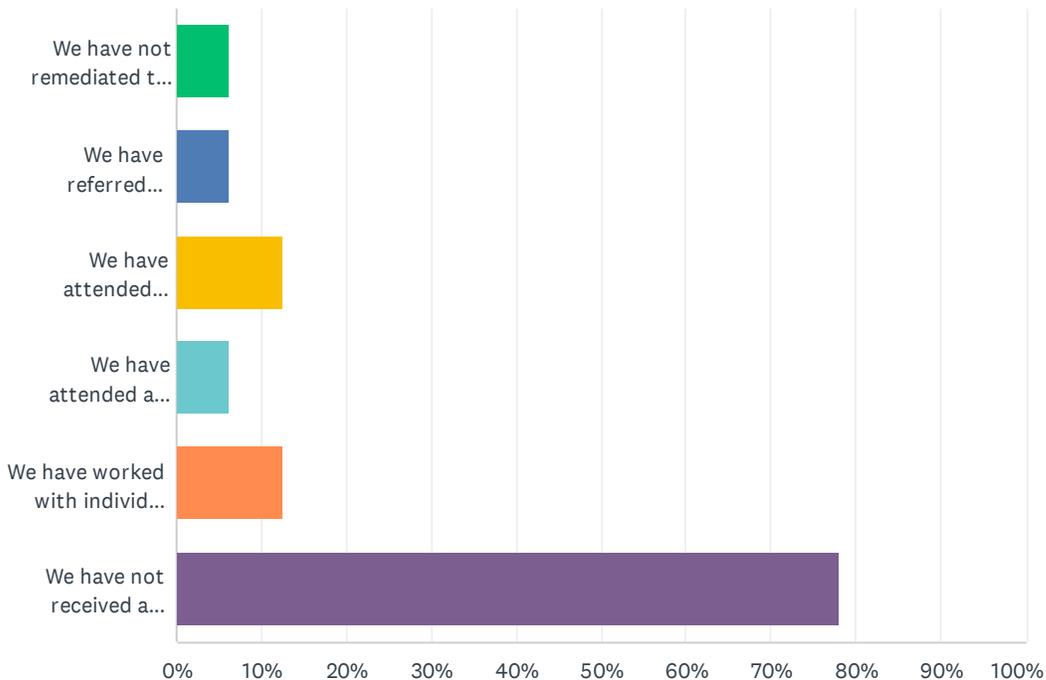
Answered: 36 Skipped: 2



ANSWER CHOICES	RESPONSES	
I agree with the primary area of noncompliance identified in the report	83.33%	30
I disagree with the primary area of noncompliance identified in the report	16.67%	6
TOTAL		36

Q20 If you disagree with the primary reason for noncompliance, what are alternative/supplemental reasons for noncompliance?

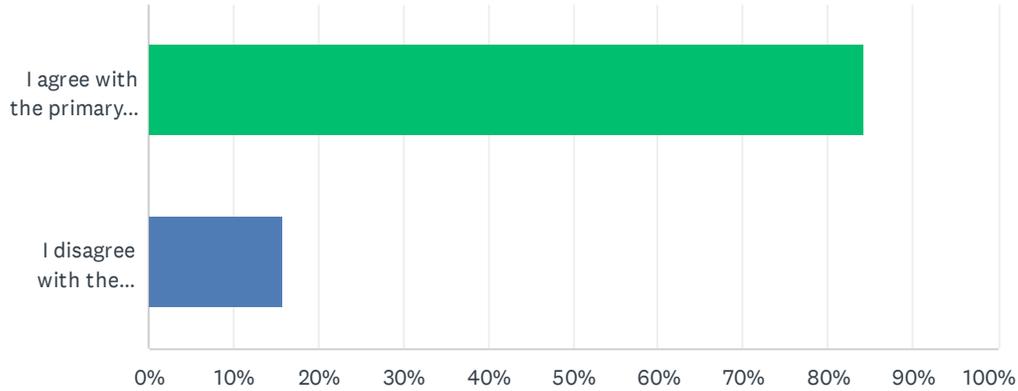
Answered: 32 Skipped: 6



ANSWER CHOICES	RESPONSES	
We have not remediated this area of noncompliance yet.	6.25%	2
We have referred providers to DBHDS for training.	6.25%	2
We have attended Provider Roundtable/SC meetings with discussion on the topic	12.50%	4
We have attended a DBHDS training/received technical assistance on this topic.	6.25%	2
We have worked with individual providers to remediate noncompliance in this area.	12.50%	4
We have not received a citation in this area.	78.13%	25
Total Respondents: 32		

Q21 Performance Measure G4: Number and percent of individuals who receive annual notification of rights and information to report ANE

Answered: 38 Skipped: 0



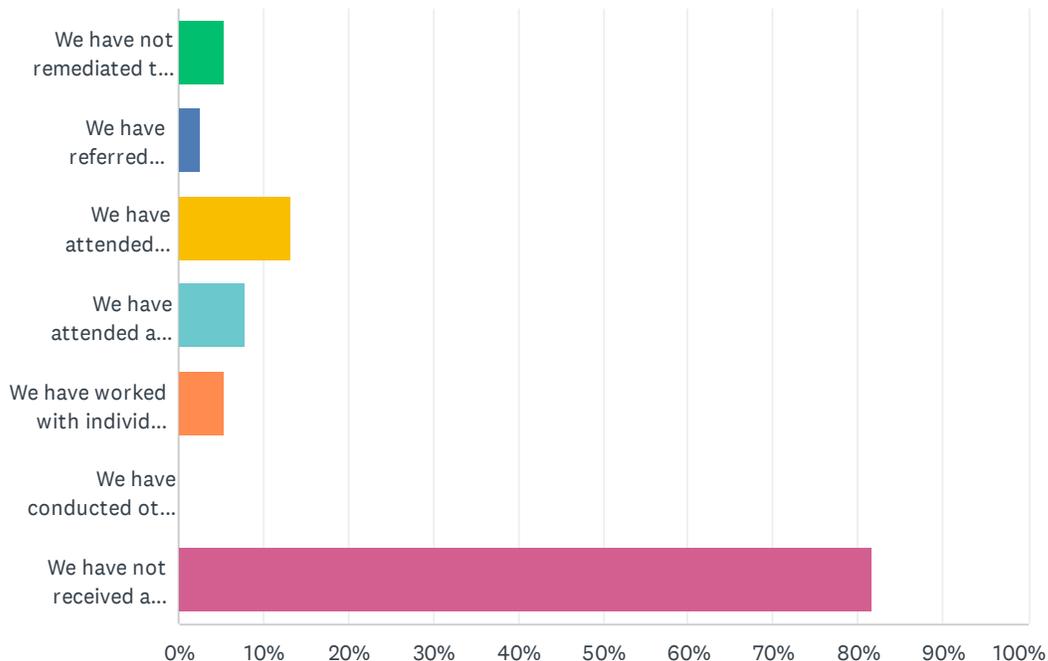
ANSWER CHOICES	RESPONSES	
I agree with the primary reason for noncompliance identified in the QRT EOY Report	84.21%	32
I disagree with the primary reason for noncompliance identified in the QRT EOY Report.	15.79%	6
TOTAL		38

Q22 If you disagree with the primary reason for noncompliance, what are alternative/supplemental reasons for noncompliance?

Answered: 8 Skipped: 30

Q23 How has your CSB remediated this area of noncompliance? Please select all that apply.

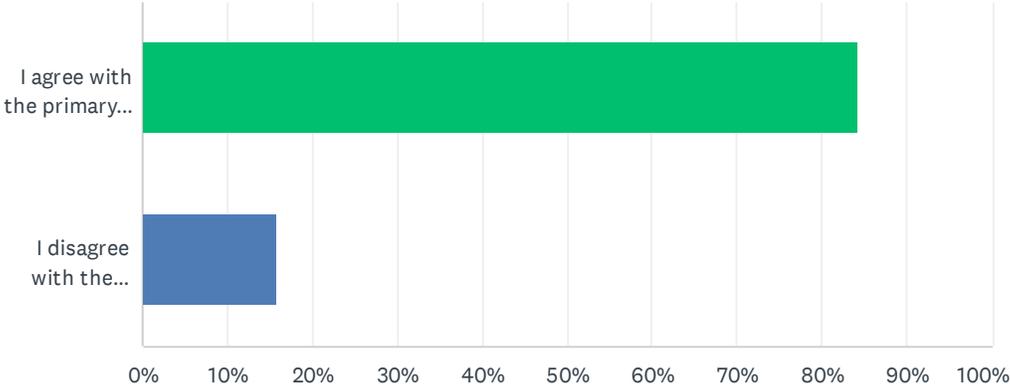
Answered: 38 Skipped: 0



ANSWER CHOICES	RESPONSES	
We have not remediated this area of noncompliance yet.	5.26%	2
We have referred providers to DBHDS for training.	2.63%	1
We have attended Provider Roundtable/SC meetings with discussion on the topic.	13.16%	5
We have attended a DBHDS training/received technical assistance on this topic.	7.89%	3
We have worked with individual providers to remediate noncompliance in this area.	5.26%	2
We have conducted other remediation.	0.00%	0
We have not received a citation in this area	81.58%	31
Total Respondents: 38		

Q24 Performance Measure G10: Number and percent of participants 19 years and younger who had an ambulatory or preventive care visit during the year.

Answered: 38 Skipped: 0



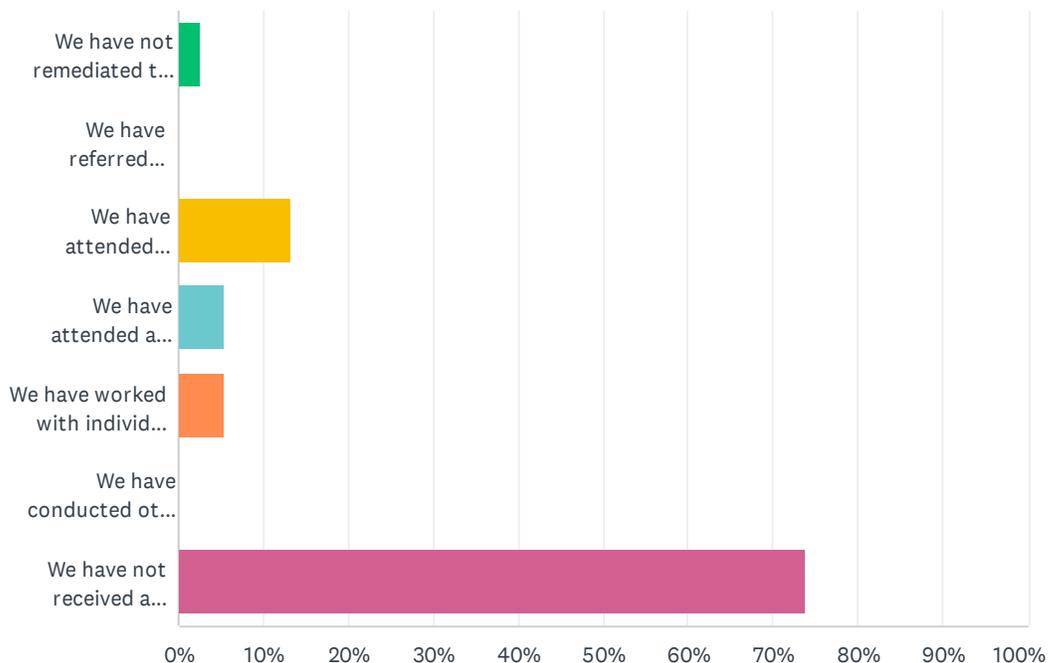
ANSWER CHOICES	RESPONSES	
I agree with the primary reason for noncompliance identified in the QRT EOY Report	84.21%	32
I disagree with the primary reason for noncompliance identified in the QRT EOY Report	15.79%	6
TOTAL		38

Q25 If you disagree with the primary reason for noncompliance, what are alternative/supplemental reasons for noncompliance?

Answered: 12 Skipped: 26

Q26 How has your CSB remediated this area of noncompliance? Please select all that apply.

Answered: 38 Skipped: 0



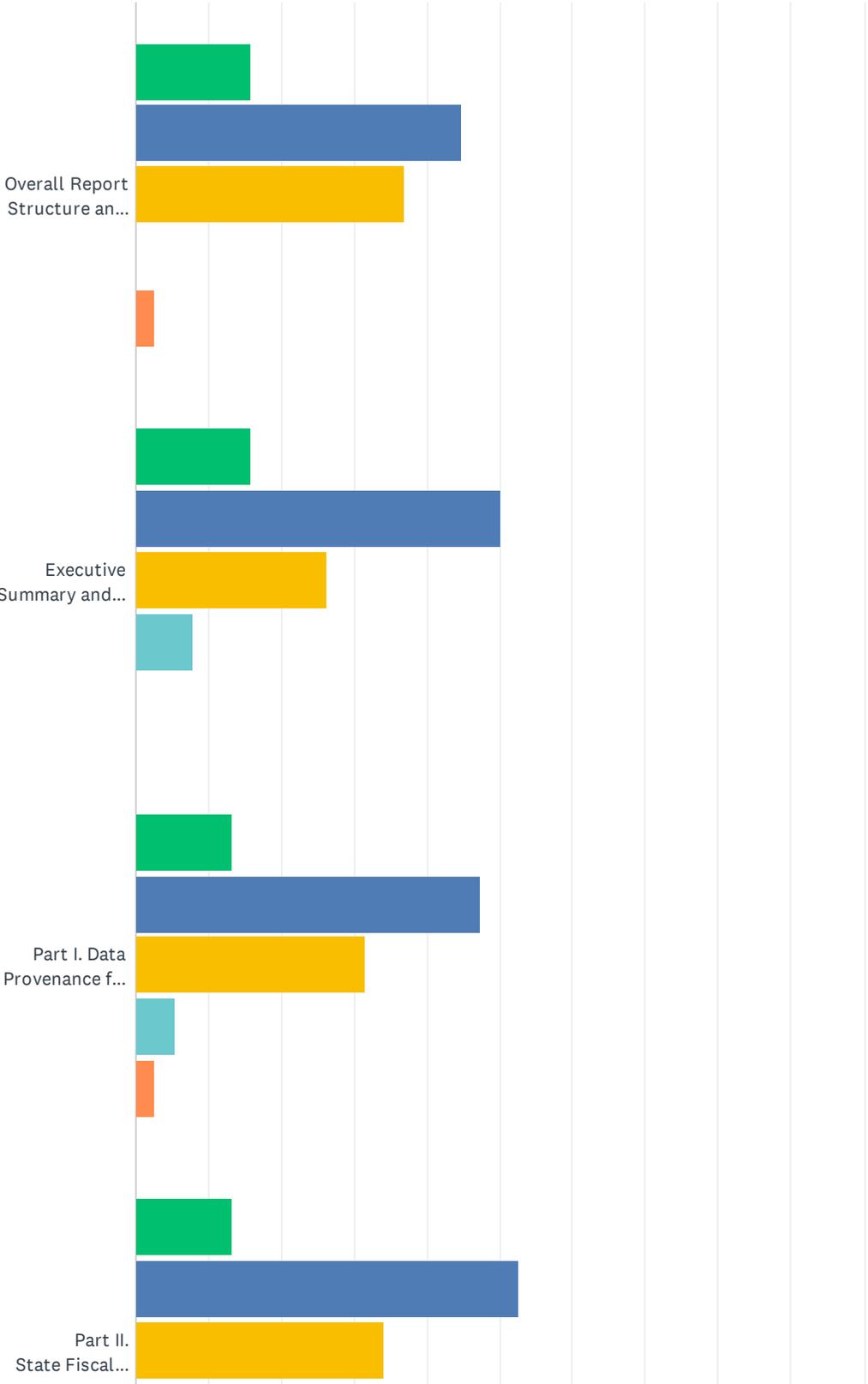
ANSWER CHOICES	RESPONSES	
We have not remediated this area of noncompliance yet.	2.63%	1
We have referred providers to DBHDS for training.	0.00%	0
We have attended Provider Roundtable/SC meetings with discussion on the topic.	13.16%	5
We have attended a DBHDS training/received technical assistance on this topic.	5.26%	2
We have worked with individual providers to remediate noncompliance in this area.	5.26%	2
We have conducted other remediation.	0.00%	0
We have not received a citation in this area	73.68%	28
TOTAL		38

Q27 Do you have any additional feedback on any PM not expressly solicited in previous questions?

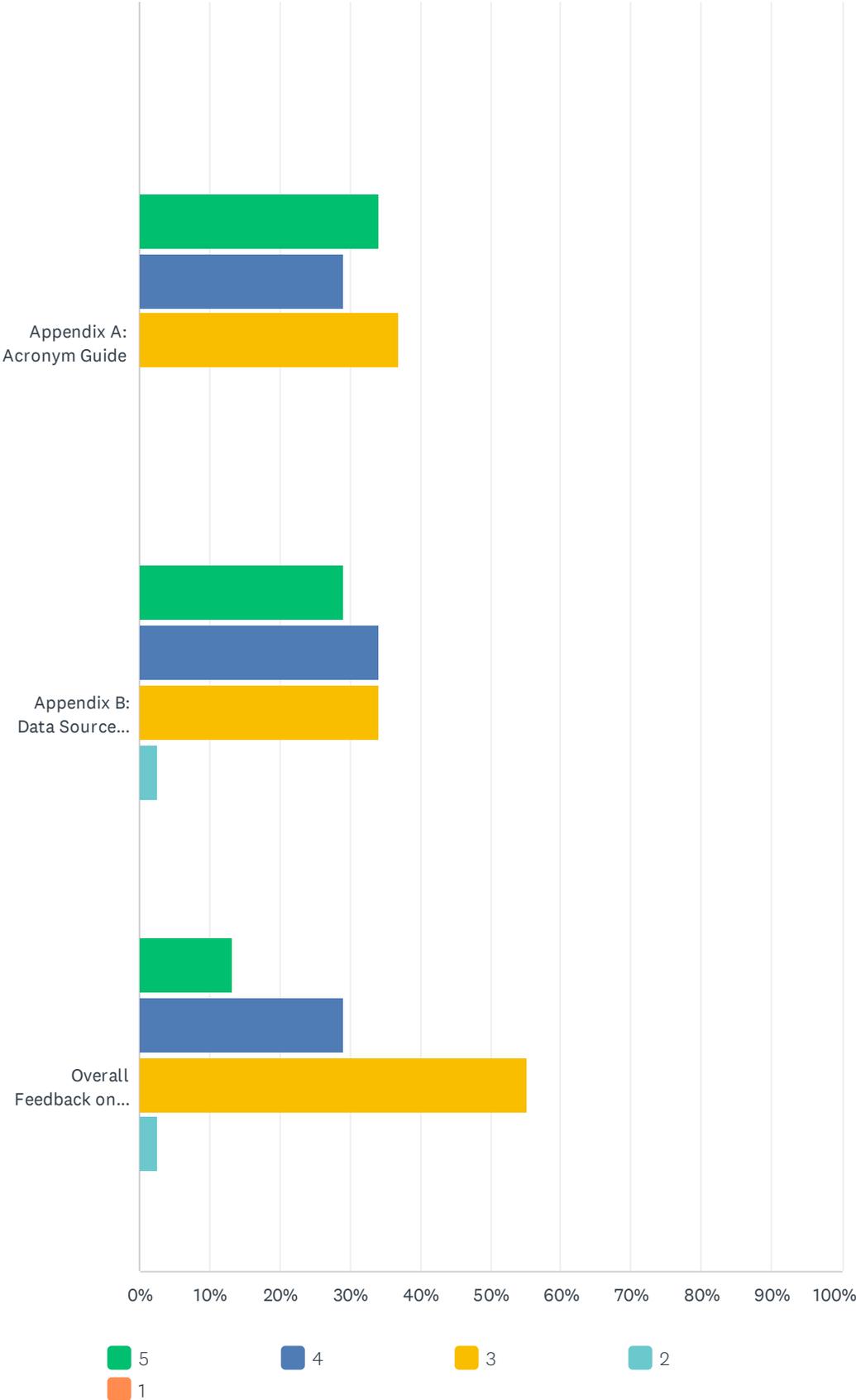
Answered: 19 Skipped: 19

Q28 Please provide overall feedback on the QRT EOY Report on a scale from 1-5 where (5) is the best possible score and (1) is the worst.

Answered: 38 Skipped: 0



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2021 QRT EOY Report CSB Review Questionnaire

	5	4	3	2	1	TOTAL
Overall Report Structure and Format	15.79% 6	44.74% 17	36.84% 14	0.00% 0	2.63% 1	38
Executive Summary and Conclusions	15.79% 6	50.00% 19	26.32% 10	7.89% 3	0.00% 0	38
Part I. Data Provenance for Health and Safety Measures	13.16% 5	47.37% 18	31.58% 12	5.26% 2	2.63% 1	38
Part II. State Fiscal Year 2021 Quality Review Team Reporting	13.16% 5	52.63% 20	34.21% 13	0.00% 0	0.00% 0	38
Appendix A: Acronym Guide	34.21% 13	28.95% 11	36.84% 14	0.00% 0	0.00% 0	38
Appendix B: Data Source Index	28.95% 11	34.21% 13	34.21% 13	2.63% 1	0.00% 0	38
Overall Feedback on Tool/Ease of Use	13.16% 5	28.95% 11	55.26% 21	2.63% 1	0.00% 0	38

Q29 Do you have any additional feedback on the overall QRT EOY Report and/or the QRT CSB Review Questionnaire Feedback tool you would like to share?

Answered: 24 Skipped: 14